

City of Sheboygan
PLUMBING/SEWER PERMIT APPLICATION

Application No.: _____

TO THE PLUMBING INSPECTOR,

Date: _____, 20____

The undersigned hereby makes an application for a permit for the purpose of draining and supplying water to the following premises:

Street: _____ **Owner:** _____

Parcel #: _____ **Description (Lot, Blk, Subd):** _____

Number of Fixtures: _____ **Cost of Construction:** _____

	Kitchen Sink		Electric Water Heater		Lab Sink
	Dishwasher		Gas Water Heater		Plaster Sink
	Water Closet		Pwr Vent Water Heater		Service/Mop Sink
	Urinal		Hose Bibb		Shampoo Sink
	Bathtub		Int. Grease Trap		Wash Fountain
	Shower		Ext. Grease Trap		Drinking Fountain
	Water Distribution		Sump Pump		Eye Wash Station
	Bidet		Sanitary Sump Pump		Catch Basin
	Water Softener		Bar Sink/Drain		Roof Drain
	Laundry Standpipe		Breakroom Sink		Site/Hub Drain
	Wash Basin		Hand Sink		Meter Setting
	Laundry Tray		Scullery Sink		RPZ Valve
	Floor Drain		Food Prep Sink		PVB/SVB Backflow Preventor
	Garage Drain		Floor Sink		Oil/Solid Separator
			Classroom Sink		Misc. Fixtures

Please Enter Size:

Type	Sanitary	Water	Storm	Connection	Other	
Original					Add'l	
Extension From Curb					Dbl Fee	
Relay						
Disconnect						
Repair						
Building Drain						

Remarks: _____

The undersigned hereby applies for a permit to do the work above described and hereby agrees to comply with City of Sheboygan Municipal Ordinances and the Wisconsin Administrative Code and with the descriptions herein set forth in this statement; and to obey any and all lawful orders of the City of Sheboygan Plumbing Inspector or his designee; understands that the issuance of the permit creates no legal liability, express or implied, on the Building Inspection Department and any agent or employee thereof, and certifies that all the above information is accurate.

Owner's Signature

Plumber's Signature